



Bib Data Sheet


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<b>SERIAL NUMBER</b> 09/476,202	<b>FILING DATE</b> 01/03/2000 <b>RULE</b> -	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1643	<b>ATTORNEY DOCKET NO.</b> 052544-0108	
<b>APPLICANTS</b> JOHN D. NOTI, ATHENS, PA ; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 02/10/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> Initials		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 25	<b>TOTAL CLAIMS</b> 43	<b>INDEPENDENT CLAIMS</b> 8
<b>ADDRESS</b> MARK A KASSEK FOLEY & LARDNER P O BOX 1497 MADISON ,WI 537011497					
<b>TITLE</b> MYELOID CELL PROMOTOR AND CONSTRUCTS CONTAINING SAME					
<b>FILING FEE RECEIVED</b> 812	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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